

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		43	2/11/01
FORMALITY REVIEW	TM	10800	5/19/01
RESPONSE FORMALITY REVIEW	lu	901	9/9/01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	2/11/01
2	2/11/01
3	2/11/01
4	2/11/01
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50	2/11/01

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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8/28/01  
 09/07/01  
 10/19/01